

## APPLICATION DATA SHEET

### **I. Application Information**

(a) Application type : Regular

(b) Subject Matter (check one):

1.  Utility
2.  Design
3.  Plant

(c) Title of Invention : **FLUIDICS CIRCUIT OF  
HEMATOLOGY ANALYZER WITH  
HEATED REACTION CHAMBER**

(d) Attorney Docket Number : **BYR-58**

(e) Total Drawing Sheets :

(f) Small entity (check one) :

1.  Yes
2.  No

### **II. Applicant Information**

#### 1. INVENTOR ONE

First Name:	<b>Joseph</b>
Middle Name:	<b>A.</b>
Last Name:	<b>RANERI</b>
Name Suffix (Jr., Sr., III, etc.):	

#### RESIDENCE

City:	<b>West Harrison</b>
State/Province:	<b>New York</b>
Country:	<b>US</b>

#### MAILING ADDRESS

Street:	<b>193 Columbus Ave Apt. 2A</b>
City:	<b>West Harrison</b>
State/Province:	<b>New York</b>
Country:	<b>US</b>
Postal or Zip Code:	<b>10604</b>

## **APPLICATION DATA SHEET (con't)**

### **II. Applicant Information (con't)**

#### **2. INVENTOR TWO**

First Name:	<b>Joseph</b>
Middle Name:	<b>J.</b>
Last Name:	<b>CARLUCCI</b>
Name Suffix (Jr., Sr., III, etc.):	

#### **RESIDENCE**

City:	<b>Harrison</b>
State/Province:	<b>New York</b>
Country:	<b>US</b>

#### **MAILING ADDRESS**

Street:	<b>6 Landolfe Place</b>
City:	<b>Harrison</b>
State/Province:	<b>New York</b>
Country:	<b>US</b>
Postal or Zip Code:	<b>10528</b>

#### **3. INVENTOR THREE**

First Name:	<b>Bruce</b>
Middle Name:	<b>E.</b>
Last Name:	<b>BEHRINGER</b>
Name Suffix (Jr., Sr., III, etc.):	

#### **RESIDENCE**

City:	<b>Park Ridge</b>
State/Province:	<b>New Jersey</b>
Country:	<b>US</b>

#### **MAILING ADDRESS**

Street:	<b>25 Fairview Avenue</b>
City:	<b>Park Ridge</b>
State/Province:	<b>New Jersey</b>
Country:	<b>US</b>
Postal or Zip Code:	<b>07656</b>

## APPLICATION DATA SHEET (con't)

### II. Applicant Information (con't)

#### 4. INVENTOR FOUR

First Name:	<b>Michael</b>
Middle Name:	<b>T.</b>
Last Name:	<b>PEETS</b>
Name Suffix (Jr., Sr., III, etc.):	

#### RESIDENCE

City:	<b>Staatsburg</b>
State/Province:	<b>New York</b>
Country:	<b>US</b>

#### MAILING ADDRESS

Street:	<b>41 West Pine Road</b>
City:	<b>Staatsburg</b>
State/Province:	<b>New York</b>
Country:	<b>US</b>
Postal or Zip Code:	<b>12580</b>

#### 5. INVENTOR FIVE

First Name:	<b>Terry</b>
Middle Name:	
Last Name:	<b>GOODSELL</b>
Name Suffix (Jr., Sr., III, etc.):	

#### RESIDENCE

City:	<b>Danbury</b>
State/Province:	<b>Connecticut</b>
Country:	<b>US</b>

#### MAILING ADDRESS

Street:	<b>2 Old Hayrake Road</b>
City:	<b>Danbury</b>
State/Province:	<b>Connecticut</b>
Country:	<b>US</b>
Postal or Zip Code:	<b>06811</b>

## **APPLICATION DATA SHEET (con't)**

### **III. Correspondence Information**

Correspondence Customer Number : 020427  
Name : Rodman & Rodman  
Street of Mailing Address : 7 South Broadway  
City of Mailing Address : White Plains  
State or Province of Mailing Address : New York  
Postal or Zip Code : 10601  
Phone Number : (914) 949-7210  
Fax Number : (914) 993-0668

### **IV. Representative Information**

Representative Customer Number : 020427

### **V. Domestic Priority Information**

Application	Continuity Type	Parent Application Number	Parent Filing Date MM/DD/YY
This application is	National Stage of	PCT/	
This application is	CON/DIV/CIP of		

### **VI. Foreign Priority Information**

Country	Application Number	Filing Date MM/DD/YY	Priority Claimed (Yes or No)

### **VII. Assignee Information**

NAME: **BAYER CORPORATION**

ADDRESS

Street:	<b>511 Benedict Avenue</b>
City:	<b>Tarrytown</b>
State/Province:	<b>New York</b>
Country:	<b>US</b>
Postal or Zip Code:	<b>10591-5097</b>